

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes No				1	9	
COMMITTEE INFORMATION	roiv l				S. Fall	
1. Full Name of Committee (as on Statement of Organization)	name.					
2. Acronym or Abbreviated Name (if any)		mmittee Tele 26-9565)	ephone I	Numbe	ir	
4. Mailing Address (Address where all campaign finance correspondence is received.) 814 JEFFERSON AVE	Check if	this is a new	addres	S.		
5. City, State, ZIP Code LAPORTE, IN 46350	Contract the Contract	ty Affiliation UBLICAN		cable)		
CANDIDATE INFORMATION (For Candidate's Co	ommit	tees Only)				
7. Full Name of Candidate (Include any nickname.)		ty Affiliation	4000	epende	ent Cand	idate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Co	ounty of Res	idence			
TYPE OF REPORT		E Alle	CON	VENTI	ON CAN	DIDATES ONLY
11. Check one: Pre-Primary Pre-Election Annual Nomination Other			☐ F	10000000000	nvention onvention	
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Uoutgoing Treasurer (Within ten (10) days amend State	ement of O	rganization.)		051-00		
. Reporting Period (mm/dd/yy): From: 01/01/2019 Through: 12/31/2019		The second second	LUMN A			COLUMN B fear to Date
13. Cash on hand and investments at the beginning of this reporting period.			11,0	082.83		
14. Cash on hand and investments January 1, current year.	\$1.7. Carlot					11,082.83
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)						
15a. Itemized (Use Schedule A.)		, 10 Ta-180 X 1	12.8	303.00		12,803.00
15b. Unitemized				0.00		0.00
15c. Add lines 15a and 15b in both columns.	TOTAL		12,8	303.00)	12,803.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL		23,8	385.83	3	23,885.83
EXPENDITURES						
(Note: These amounts include in-kind expenditures and loan repayments.)						
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)			17,5	509.20)	17,509.20
17b. Unitemized				0.00)	0.00
17c. Add lines 17a and 17b in both columns.	TOTAL		17,5	509.20)	17,509.20
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL		6,3	376.63	3	6,376.63
19. Debts OWED BY the committee (Use Schedule D.)				0.00)	
20. Debts OWED TO the committee (Use Schedule E.)				0.00)	
CERTIFICATION.	C 10.13				FOR OF	FICE USE ONLY
CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO	RUE CO	RRECT AND (OMPLET	EINI	IONI	OFFICE PLEI
Signature of Treasurer Title TREASURER	1102,00	Date (mm/c 03/02	ld/yy)	-1124		
Signature of Candidate (in applicable)		Date (mm/c		MA	AR 2	2 2020
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accura Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-	ate report	as required b	y the Indi	iana	Kengunen LA PORTE	Publichi CIRCUIT COURT



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUMB	ER		
			A-10-20-24		
	0		,	0	_
Page	2	of _		7	_

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. JOHN & SHARON BEALOR 7253 E 350 N ROLLING PRAIRIE, IN 46371	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$192.00	\$192.00	12/06/191s
2. DOUG BIEGE 820 JEFFERSON AVE LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	04/19/19 en.
3. STEVE & SUE BOWERS 10258 S 100 E UNION MILLS, IN 46382	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	4/19/19 I ZONA
4. STACI MITCHELL Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	4/19/19
5. ROGER GROTT Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	4/19/19 I ZONA
	THIS PAGE OF SCHEDULE A	\$ 942.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEI	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUMBER	
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	0	26	7 19.1
Page _	9	_ of	1

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.EDWARD & JUDY BOWMAR 9786 S 125 E UNION MILLS 46382	Contributions: Direct In-Kind (describe)			ALS 4/16/19ts
# 600 Risk	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
Contributor's Occupation (if required)				145
2. WILLIAM & MARY CHRISTAKES 607 LAKESIDE LA PORTE, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan	\$250.00	\$250.00	4/22/19
	Miscellaneous (specify)		= = _	IZONA
Contributor's Occupation (if required)				10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.00
3.TOM & JACKI DERMODY 1658 S WILLOW BEND RD LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			4/19/19
RETIRED BUSINESSMAN	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,500.00	\$1,500.00	I ZONA
Contributor's Occupation (if required)	2			
4.PAMELA DISHMAN 305 PLUMMER ST LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			4/19/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	/19
Contributor's Occupation (if required)				4
5. PHYLLIS EKOVICH 1752 N 350 E ROLLING PRAIRIE, IN 46371	Contributions: Direct In-Kind (describe)			12/30/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$123.00	\$123.00	IZONĄ
Contributor's Occupation (if required)				Julints
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 2,223.00		表的过去式和过去分
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUMBER	
Page _	4	_ of	7

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.TOM & MARY EULER P O BOX 593 ROLLING PRAIRIE, IN 46371 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$938.00	\$938.00	1 ZONA
2. MITCH & CARLY FEIKES 1328 LAKESIDE ST LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$650.00	\$650.00	8/22/19/E0
3. DEB FLEMING 1629 E JEFFERSON BLVD SOUTH BEND, IN 46545 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	4/22/19 I ZONA
4.TIM & ELIZABETH FRANKE 11 GREENACRES LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	4/19/19 I ZONA
5. ROGER & LINDA GALLOWAY 608 TUCUMSEH ST LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$412.00	\$412.00	12/06/19 I ZONA
The contributed of the Contribution of the Contribution (Contribution Contribution)	THIS PAGE OF SCHEDULE A	\$ 2,200.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUME	BER	
Page _	5	of	1	9

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.MICHAEL GONDER 114 BITTERSWEET TRL MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$170.00	\$170.00	12/06/19ts
2. RICH AND CONNIE GRAMAROSSA 8444 N 500 E ROLLING PRAIRIE, IN 46371 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	4/29/19 I ZONA
3. CYNTHIA HEDGE P O BOX 9600 MICHIGAN CITY, IN 46360 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$123.00	\$123.00	12/06/19 I ZONA
4. RON HEEG 5161 N CAMERON LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	4/22/19 1 ZONA
5. HOOSIER TRAVEL 623 STATE ST LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	4/29/20 I ZONA
A CONTRACTOR ACCOUNTS	THIS PAGE OF SCHEDULE A	\$ 743.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY In 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

	FILE	NUME	ER	
Page _	6	of _	16	3

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. HOWARD G JONES 1815 MICHIGAN AVE LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	4/29/1901s
2.JOHN & MARGERY KEGEBEIN 9815 S 275 E HAMLET, IN 46532 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	4/16/19 = 1
3. CARY KIRKHAM 1530 MICHIGAN AVE LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	8/22/19 I ZONA
4. CORAL LAUN P O BOX 344 KINGSFORD HEIGHTS, IN 46346 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	4/22/19 I ZONA
5. KEN LAYTON 14989 W 500 S LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	4/19/19 I ZONA
	THIS PAGE OF SCHEDULE A	\$ 1,150.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITER	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUMBER
Page _	7	of 194

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.ED LINDBORG 1417 INDIANA AVE LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			4/29/19ts
Self selfer	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	I ZONA
Contributor's Occupation (if required)	1 2 7			144
2. ROBERT & MARY LOU MCFADDEN 2714 DUFFY LANE LONG BEACH, IN 46360	Contributions: ☑ Direct ☐ In-Kind (describe)			04/22/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	I ZONĀ
Contributor's Occupation (if required)				
3. JOHN &B DEBORAH MENGAL 1508 LAKESHORE DRIVE LONG BEACH, IN 46360	Contributions: Direct In-Kind (describe)			12/03/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$192.00	\$192.00	I ZONA
Contributor's Occupation (if required)	Contributions:			
605 LAKESIDE LA PORTE, IN 46350	Direct In-Kind (describe)			12/03/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$210.00	\$210.00	IZONĄ
Contributor's Occupation (if required)				IF A
5.MERLE MILLER 111 ROOSEVELT ST LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			4/19/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	I ZONA
Contributor's Occupation (if required)	Y			Shire.
	THIS PAGE OF SCHEDULE A	\$ 702.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUMBE	R	
_	8	I April 1	/	9
Page _	<u> </u>	_ of	/	1

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. TOM MILO 92 KESTON ELM DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	6/26/19\fs
	Other Receipts: Interest Loan Miscellaneous (specify)	\$450.00	\$450.00	I ZONA
Contributor's Occupation (if required)				
2. EDWIN MUELLER 117 EVERGREEN DR LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			6/26/19/En
	Other Receipts: Interest Loan Miscellaneous (specify)	\$350.00	\$350.00	I ZONA
Contributor's Occupation (if required)	\			-16/2002
3. DUANE PARRY 2206 MAPLE ST MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			12/06/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$261.00	\$261.00	Wally and the state of the stat
Contributor's Occupation (if required)	1			12,000
4.COURTNEY PARTHUM 1533 MICHIGAN AVE LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			3/29/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	IZONA
Contributor's Occupation (if required) 5, ROBERT & SHEILA POLLOCK				
100 LAKE SHORE DR APT. 102 MICHIGAN CITY, 46360	Contributions: Direct In-Kind (describe)			12/03/19
	Other Receipts: Interest Loan Miscellaneous (specify)	\$246.00	\$246.00	I ZONA
Contributor's Occupation (if required)	-			Total
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,407.00		35-4
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEI	A ON THE LAST PAGE ONLY It 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE N	UMBER	
		Spinore	
Page _	9	of	19

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.MICHAEL ROSENBAUM 1515 INDIANA AVE LA PORTE, IN 46350	Contributions: Direct In-Kind (describe)			6/26/19ts
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	I ZONA
2. RONAND SCHAFER 1566 GLACIER BEND LA PORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$246.00	\$246.00	12/06/19 ED
3. JILL SKONIECZNY 125 S DICKSON ST MICHIGAN CITY, IN 46360 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$100.00	04/16/19 I ZONA
4. TIM STABOSZ 1501 MICHIGAN AVE LA PORTE, IN 46350 FINANCIAL PLANNER Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$1,500.00	\$1,500.00	04/16/19 I ZONA
5. ALLEN STEVENS 5277 W 1475S HANNA, IN 46340 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$125.00	\$125.00	12/30/19 I ZONA
SUBTOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$ 2,071.00		
	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE NUMBER	
Page		19

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. JOANNE THORNE 2609 FAIRWAY DR MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	4/9/19pts
Contributor's Occupation (if required)				
2. JACKIE WALORSKI P O BOX 954 MISHAWAKA, IN 46546 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	4/19/19/ED
3. DICK WELSH 3011 W 900 S UNION MILLS, IN 46382	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	4/9/19 I ZONA
Contributor's Occupation (if required) 4. iLENE ZONA 6706 N 300 W MICHIGAN CITY, 46360 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$115.00	\$115.00	12/06/19 I ZONA
5. ED CHARBONNEAU 2503 SHERWOOD DR VALPARAISO, IN 46385 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	4/16/19 I ZONA
Control of the Contro	THIS PAGE OF SCHEDULE A	\$ 1,365.00		EVENT :
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$ 12,803.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILI	E NUME	BER	
Page _	11	of	19	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. NONE	Contributions: Direct In-Kind (describe)			TIONS
INSTRUCTO TONE BLACE INK Own codes Grown of the second	Other Receipts: Interest Loan Miscellaneous (specify)	1.0		1010
2.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan		To be	ÆGEIVED (ddyy) Eleb by
	Miscellaneous (specify)			HONS ejots
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			I CENED
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)	•		
5.	Contributions: Direct In-Kind (describe)			lajz (Vcia)
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	. THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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		4.4
	12	19

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. NONE	Contributions: Direct In-Kind (describe)			pts
	Other Receipts: Interest Loan Miscellaneous (specify)		1.	
2.	Contributions: Direct In-Kind (describe) Other Receipts:			/50
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			pts
3.	Contributions: Direct In-Kind (describe)			
-	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00		THE REAL PROPERTY.
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEN	A ON THE LAST PAGE ONLY 1 15a of the Summary Sheet.)	\$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page _	13 of 1	9

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. NONE	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan			ES cipts
2.	Miscellaneous (specify) Contributions: Direct In-Kind (describe)			V-1
3.	Other Receipts: Interest Loan Miscellaneous (specify) Contributions:			
J	Direct In-Kind (describe) Other Receipts: Interest Loan			
4.	Miscellaneous (specify) Contributions: Direct			JET .
	Other Receipts: Interest Loan Miscellaneous (specify)			S vots
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			184 184
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY 115a of the Summary Sheet.	\$ 0.00 \$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER	
	7-1752
Page	9
	THE POST PERSONNEL PROPERTY AND ADMINISTRATION AND

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECE (mm/dd/y) RECEIVED BY
1, NONE	Contributions: Direct In-Kind (describe)			445
	Other Receipts: Interest Loan Miscellaneous (specify)			
2.	Contributions: Direct			
V. C.	In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			2007
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet.)	\$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

.NSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE NUME	ER
		10
Page	15 of_	19

					Company of the last of the las
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code O AMERICAN WELDING AND GAS PO 74008003 CHICAGO, IL 60674		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$296.02	\$296.02	7/16/19
Code O APPLE SOUND PRODUCTION LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$250.00	\$250.00	11/05/19
Code F ELI BILDERBACK 127 INDIANA AVE LAPORTE, IN 46350	8	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$137.61	\$137.61	05/11/19
TRACY BISHOP		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$100.00	\$100.00	05/07/19
FRONTIER COMMUNICATIONS 5050 KINGSLEY AVE CINNINNATI, OHIO		☑ Direct	\$990.30	\$990.30	12/30/19
N.I.P.I.S.C.O. P O BOX 13007 MERRIVILLE, IN 46411		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$1,117.00	\$1,117.00	12/20/19
Code O LAPORTE MASONIC LODGE P O BOX 54 'APORTE, IN 46352		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose;	\$4,500.00	\$4,500.00	12/25/19
	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$ 7,390.93		
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of		\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

"NSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FIL	E NUME	BER	
Page //	2 of _	10	1

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
GENERAL INSURANCE SVC 1200 MICHIGAN AVE LAPORTE, IN 46350		☑ Direct	\$1,170.00	\$1,170.00	12/31/19
Code O HEATHER STEVENS 5277 W 1475 S HANNA, IN 46340		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$220.00	\$220.00	03/29/19
Code O ILENE ZONA 706 N 300 W ./ICHIGAN CITY, 46360		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$1,231.49	\$1,231.49	12/31/19
Code F LAPORTE CIVIC AUDITORIUM 1001 RIDGE ST LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$1,024.79	\$1,024.79	5/24/19 29/19
Code 0 LAPORTE COUNTY FAIR 2581 W ST RD 2 LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$675.00	\$675.00	6/6/19
Code 0 ROBIN MARS ?		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$100.00	\$100.00	11/5/19
Code 0 MIKE WOMAC ?		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$100.00	\$100.00	11/5/19
TOTAL OF ALL PA	SUBTOTAL THIS PAGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of t	E LAST PAGE ONLY	\$ 4,521.28 \$		



MITTEE

(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

**NSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE NUM	BER
Page	17 of	19

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	(mm/dd/yy)
PIONEERLAND LAPORTE CO FAIR GROUNDS LAPORTE, IN 46350		☑ Direct	\$100.00	\$100.00	3/28/19
Code F PORTOFINE RESTAURANT 3233 N ST RD 39 LAPORTE, IN 46350		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$1,176.25	\$1,176.25	12/08/19
POSTMASTER OF LAPORTE 201 LINCOLNWAY LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$335.00	\$335.00	10/15/19
Code F ROUND THE CLOCK RESTAURANT 219 PINE LAKE AVE LAPORTE, IN 46350		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$2,645.74	\$2,645.74	04/24/19
Code 0 SILVER PALACE 1719 STATE ST LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$1,100.00	\$1,100.00	11/05/19
Code A WEFM RADIO 1903 SPRINGLAND AVE MICHIGAN CITY, IN 46360.		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$240.00	\$240.00	08/23/19 1/24/19
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			19/19 15/ 19
	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$ 5,596.99		10001
TOTAL OF ALL P	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of t		\$ 17,509.20		

124/19



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14) (CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

Page 8 of 19

FILE NUMBER

			Page /	of _	19
	PUBLIC QUESTIC	N INFORMATION			
Enter Text of Public Question.					
1 1 1 1 1 1 1 1			4.4	A. 7 M	
* ***	_				
Type of Question: Statewide			F 12	ni	
Position: Supported Opp		TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE (mm/dd/yy)
	OFFICE AND	Direct In-Kind	LIMOD		
NONE		☐ Payment of Debt			s (AMS)
NONE		Returned Contribution Other			70.55
e e		Purpose:			curvier s
					- 144B
Code		☐ Direct ☐ In-Kind	0.000		INES
3300		Payment of Debt Returned Contribution			
		Other			
	D.	Purpose:			
1/90.009		☐ Direct ☐ In-Kind			122
Code		Payment of Debt			
		Returned Contribution Other			1.05
		Purpose:			
		☐ Direct ☐ In-Kind			
Code		Payment of Debt			1-7-1-8
		Returned Contribution Other			FIRES
		Purpose:			
rie I a					197723 I
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
4		Returned Contribution			14,64
		Other Purpose:			nelly
		r uipose.			7.432
Code		☐ Direct ☐ In-Kind			
		Payment of Debt Returned Contribution			- I IIII CHI LEC
L		Other			TES
1		Purpose:			142-13
	SUBTOTAL THIS PA	GE OF SCHEDULE C	\$ 0.00		
TOTAL OF ALL PA	GES OF SCHEDULE C ON TH				
	(Enter total on ITEM 17a of		\$ 0.00	PART - NATE OF	ALTERNATION OF THE PARTY OF THE



(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, **OWED TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

	FILE	NUMBE	R	
Page _	19	of	19	1025

BORROWER'S NAME	CO-SIGNER'S NAME	ORIGINAL AMOUNT	DATE DEBT	CUMULATIVE	OUTSTANDING
AND MAILING ADDRESS (street, number, city, state, ZIP code)	AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED (mm/dd/yy)	PAID YEAR-TO-DATE	BALANCE THIS PERIOD
NONE					
				30.	
12.7% a					
Cen Till Willia					
				1	
. 5					
- 0					
					1 - 24 201 - 4
100					
		A Maria Balay P Commission Commis		OF SCHEDULE E	\$ 0.00
	TOTAL OF A	ALL PAGES OF SCHEDUL (Enter total on l		ST PAGE ONLY Summary Sheet.)	\$ 0.00



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?
Yes
No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

17

COMMITTEE INFORMATION			
Full Name of Committee (as on Statement of Organization) Check if this is a new LAPORTER COUNTY REPUBLICAN CENTRAL COMMITTEE Check if this is a new LAPORTER COUNTY REPUBLICAN CENTRAL COMMITTEE	name.		
2. Acronym or Abbreviated Name (if any)	3. Committee	e Telephone Number	
	(219)	326-9565	
4. Mailing Address (Address where all campaign finance correspondence is received.) 814 JEFFERSON AVE	Check if this is a	a new address.	
5. City, State, ZIP Code LAPORTE, IN 46350	6. Party Affili	iation (if applicable) CAN	
CANDIDATE INFORMATION (For Candidate's C	ommittees C	Only)	
7. Full Name of Candidate (Include any nickname.)	8. Party Affilia	ation or If Independent	Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County o	f Residence	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
☐ Pre-Primary Pre-Election ☐ Annual ☐ Nomination ☐ Other		Pre-Conve	ntion
Final / Disbands Committee (Lines 18, 19, and 20 must be "0".) Outgoing Treasurer (Within ten (10) days amend State	tement of Organizatio	on.) Dost-Conve	ention
12. Reporting Period (mm/dd/yy):	Sis	COLUMN A	COLUMN B
From: 01/01/20 Through: 10/09/20		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		7,099.19	
14. Cash on hand and investments January 1, current year.			7,099.19
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (Use Schedule A.)		9,734.00	11,144.00
15b. Unitemized		1,410.00	6,715.00
15c. Add lines 15a and 15b in both columns.	TOTAL	11,144.00	17,859.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	24,958.19	24,958.19
EXPENDITURES		Caracia de la la	The Real Property of
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)	5,076.52	9,734.74	
17b. Unitemized	151.69	351.69	
17c. Add lines 17a and 17b in both columns.			10,086.43
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)			14,781.76
19. Debts OWED BY the committee (Use Schedule D.)		0.00	A STATE OF THE STA
20. Debts OWED TO the committee (Use Schedule E.)		0.00	
		-22	
CERTIFICATION I CERTIFY THAT I) HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TO	DUE CORRECT !		R OFFICE USE ONLY ERKS OFFICE
Signature of Treasurer Signature of Treasurer Signature of Treasurer		mm/dd/yy)	LNAS OFFICE
Signature of Candidate (if applicable)	Date (n	mm/dd/yy) OCT	1 9 2020

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana. Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE NUME	BER
		1
Page _	of_	171

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. JOHN BEALOR 7253 E 350 N ROLLING PRAIRIE, IN 46371	Contributions: Direct In-Kind (describe)	PENIOD	TEAN TO-BATE	05/09/20ts
RHS ² SE ² Si ² CDr ² SE	Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$200.00	I ZONA
contributor's Occupation (if required) 2. DION BERGERON 1018 PROVIDENCE ST MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe) Other Receipts:	\$200.00	\$300.00	9/24/20/ED
Contributor's Occupation (if required)	Interest Loan Miscellaneous (specify)	\$200.00	\$300.00	IZONA
3. GEORGE BOLLHORST, SR 307 LONG BEACH LN MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			10/07/20
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$190.00	\$390.00	I ZONA
4. WILLIAM CHRISTAKES 610 LAKESIDE ST LAPORTE, IN 46350	Contributions: ☑ Direct ☐ In-Kind (describe)			10/15/20
Contributor's Occupation (if required) BUSINESS OWNER	Other Receipts: Interest Loan Miscellaneous (specify)	\$1,350.00	\$1,350.00	IZONA
5. EARL CUNNINGHAM 6311 W SHIVA DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			10/07/20
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	1,745,20
Contributor's Occupation (if required)SUBTOTAL 1	THIS PAGE OF SCHEDULE A	\$1990.00		TOPOUS
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE NUMBER
	,
Page _	3 of 17

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1. DAKOTA EULER	Contributions:		. Th	VIDUALS
301 PINE LAKE AVE	☑ Direct			
LAPORTE, IN 46360	In-Kind (describe)			05/09/20ts
1 N		50.00	**	
Pt.	Other Receipts:		\$110.00	
9.15	Interest Loan		27 10888	Commence of the Commence of th
-20	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				1
2. MITCH FEIKES	Contributions:			
1328 LAKESIDE ST	✓ Direct			
LAPORTE, IN 46350	☐ In-Kind (describe)			09/24/20 = 1
7.58				(4 ¹ /yy)
	Other Receipts:	\$250.00	\$250.00	BY
	☐ Interest ☐ Loan	4-23.23	\$200.00	LOCAL COLOR
- V	Miscellaneous (specify)			LZONA
Contributor's Occupation (if required)				Tempots
3. DAN GRANQUIST	Contributions:			
1070 S CALUMET RD # 892	Direct			
CHESTERTON, IN 46304	☐ In-Kind (describe)			10/07/20
CHESTERTON, IN 40304	In-Kine (describe)			TOPOLICA
√_	Other Benjata	\$200.00	\$200.00	71+11-1
T D	Other Receipts: Interest Loan	\$200.00	\$200.00	
	Miscellaneous (specify)			LZONA
N N				12014
Contributor's Occupation (if required)				12,637
4.CYNTHIA HEDGE	Contributions:			
P O BOX 9600	Direct			07/04/00
MICHIGAN CITY, 46360	In-Kind (describe)			07/31/20
				LECTION IS
	Other Receipts:	\$200.00	\$200.00	
-41	Interest Loan			
1.5	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				
5. RALPH HOWES	Contributions:			i-11-1-1-1
3487 W WAVERLY RD	✓ Direct			
LAPORTE, IN 46350	☐ In-Kind (describe)			10/15/20
				Zum
Fig.	Other Receipts:	\$200.00	\$200.00	
191	☐ Interest ☐ Loan	8		
į į	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				113 (20)
	THIS PAGE OF SCHEDULE A	. 920	克里茨 在坚持的	
TOTAL OF ALL PAGES OF SCHEDULE		\$ 900.0		
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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUME	BER	
	11	-	- /	THA
Page	4	of _	1	100
	-	17.17	1	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1. ADAM KORONKA	Contributions: Direct			ALS
LADODTE IN 46250	In-Kind (describe)			10/15/20ts
LAPORTE, IN 46350	III-Killa (describe)			10/13/2013
		#450.00	# 450.00	
[3]. 30	Other Receipts: Interest Loan	\$150.00	\$150.00	
un.	Miscellaneous (specify)			1.70114
rat-	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				3.7/20
2. TIM KUNSTEK	Contributions:			
2654 S 400 E	✓ Direct			
LAPORTE, IN 46350	☐ In-Kind (describe)		4.0	10/07/20
			1 2 3	
	Other Receipts:	\$145.00	\$145.00	
	☐ Interest ☐ Loan	* 1 13133	4,,,0,,0	11.63
	Miscellaneous (specify)			LZONĀ
	000 944			- 20ts
Contributor's Occupation (if required)				
3.CORL LAUN	Contributions: Direct			
P O BOX 344	In-Kind (describe)			10/07/20
KINGSFORD HEIGHTS, IN 46346	In-Kind (describe)			10/07/20
1291	88 8 8		0.5000	11/2/11
-00 GH	Other Receipts:	\$150.00	\$150.00	
	Interest Loan			12/10/10
ukie	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				
4. MARK LEYVA	Contributions:			7.00
3545 CONDIT AVE	✓ Direct			
HIGHLAND, IN	☐ In-Kind (describe)			10/07/20
				andts
	Other Receipts:	\$200.00	\$200.00	1,000,000
± 39	☐ Interest ☐ Loan	A		
Ĭ#	Miscellaneous (specify)			IZONA
				TJ//20
Contributor's Occupation (if required)				THA
5. RICHARD LIDKE	Contributions:			
P O BOX 9402	Direct			10/15/20
MICHIGAN CITY, IN 46360	In-Kind (describe)			10/15/20
eq.	9	*****	000000	
and the second s	Other Receipts:	\$200.00	\$200.00	
	Interest Loan			and the state of t
	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				A
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 845.00		THE REPORT OF
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY			
(Enter total on ITEM	M 15a of the Summary Sheet.)	\$	DESCRIPTION OF THE PARTY OF	THE SEAL OF THE PARTY OF THE PA



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

FILE NUMBER						
				ALI		
Page	5	of _	1	7		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.ROBERT LONIE 1401 1/2 FRANKLIN ST APT B MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	09/24/20ts
SP ₂	Other Receipts: Interest Loan Miscellaneous (specify)	\$150.00	\$150.00	IZONA
Contributor's Occupation (if required)	Contributions:			- 30
1311 BOYD BLVD LAPORTE, IN 46350	Direct In-Kind (describe)			05/09/20
	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	I ZONA
Contributor's Occupation (if required)	35 % 102			Truzots
3. DUANE MILLER 605 LAKESIDE ST LAPORTE, IN 46350	Contributions: ☑ Direct ☐ In-Kind (describe)			10/15/20
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$180.00	\$280.00	IZONA
4. DOLLY MILLICK	Contributions: Direct			
3708 OAKDALE CT MICHIANA SHORES, IN 46360	In-Kind (describe)			10/15/20
	Other Receipts: Interest Loan Miscellaneous (specify)	\$50.00	\$150.00	I ZONĄ
Contributor's Occupation (if required)	Contributions:			10
1532 MICHIGAN AVE LAPORTE, IN 46350	☑ Direct ☐ In-Kind (describe)			09/24/20
	Other Receipts: Interest Loan Miscellaneous (specify)	\$250.00	\$250.00	I ZONA
Contributor's Occupation (if required)				73/20
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 1130.00		AND THE RESIDENCE
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

	FILE	NUMBER	
Page _	6	of	71

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.LEIGH MORRIS 424 UPPER LAKE SHORE DR LAPORTER, IN 46350	Contributions: Direct In-Kind (describe)	PENIOD	TEARTO-DATE	4LS 09/24/20ts
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	\$500.00	\$500.00	I ZONA
2.RICH MROZINSKI 2303 E 150 N LAPORTE, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$305.00	\$405.00	10/07/20 I ZONA
Contributor's Occupation (if required) 3. JAIME OSS 3846 N MALAGA DR LAPORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$100.00	\$350.00	10/07/20 I ZONA
4. DUANE PARRY 2206 MAPLE ST MICHIGAN CITY, IN 46360 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$200.00	\$200.00	10/15/20 I ZONA
5, MIKE ROSENBAUM 1515 INDIANA AVE LAPORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	\$400.00	\$500.00	10/15/20 I ZONA
	HIS PAGE OF SCHEDULE A	\$ 1505,00	n = 1	
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

	FILE	NUMBER	
Page	7	of	7 1A

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd/yy)
(street, number, city, state, ZIP code) 1. RON SCHAFER	0 17 5	PERIOD	YEAR-TO-DATE	RECEIVED BY
1566 GLACIER BEND	Contributions: Direct			LALS_
LAPORTE, IN 46350	In-Kind (describe)			09/24/20ts
EAI OKTE, IN 40000				
	Other Receipts:	\$250.00	\$350.00	
gic*	Interest Loan	Ψ200.00	Ψ000.00	
eur	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				LIA
2. JOE SMITH	Contributions:			1/10
1078 S 300 E	Direct			1/ (1.72)
LAPORTE, IN 46350	In-Kind (describe)			05/09/20
in the second se				
	Other Receipts:	\$50.00	\$150.00	
	☐ Interest ☐ Loan			AIG
	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required)				TAMES AND THE
3. TIM STABOSZ	Contributions:			
1501 MICHIGAN AVE	✓ Direct			
LAPORTE, IN 46350	☐ In-Kind (describe)			09/24/20
				The state of the s
- ** 	Other Receipts:	\$1,650.00	\$1,650.00	11/2
	Interest Loan			
	Miscellaneous (specify)			IZONA
Contributor's Occupation (if required) BUSINESS OWNER				
4. ALLEN STEVENS	Contributions:			
5277 W 1475 S	Direct			1011506
HANNA, I 46340	In-Kind (describe)			10/15/20
				a neapts
1	Other Receipts:	\$309.00	\$309.00	hace the by
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			
The state of the s	Miscellaneous (specify)			1ZONA
Contributor's Occupation (if required)				14/4
5. JANIS STEVIS	Contributions:			175
LAPORTE, IN 46350	Direct			05/09/20
	In-Kind (describe)			05/09/20
	The state of the s	\$200.00	\$200.00	######################################
	Other Receipts:	⊅∠∪0.00	\$200.00	
200	Miscellaneous (specify)			LZONA
The state of the s	(opcon))			11,200
Contributor's Occupation (if required)	MINISTER & CARP STALL FOR STOWN AWAY.	01/20 -1		a service serv
	THIS PAGE OF SCHEDULE A	\$ 2459.00		TO BELLEVILLE
TOTAL OF ALL PAGES OF SCHEDULE A	A ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$		
Enter total off ITEM	iou or the outlinary offeet.)			The state of the s



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE NUMBER	
Page	8_of_/	170

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	FULL MAILING ADDRESS OR OTHER RECEIPT		COLUMN B CUMULATIVE	DATE RECEIVED (mm/dd) RECEIVED	
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVE	
1.PAUL VINCENT 1516 MICHIGAN AVE	Contributions: Direct			ALS	
LAPORTE, IN 46350	In-Kind (describe)			10/07/20ts	
LAPORTE, IN 40330	In-Kila (describe)			1 Telephone 1 to 1	
	Other Receipts:	\$455.00	\$455.00		
	Interest Loan	ψ+33.00	Ψ433.00		
	Miscellaneous (specify)			IZONA	
Contributor's Occupation (if required)					
2. ILENE ZONA	Contributions:				
6706 N 300 WEST	Direct			1.10	
MICHIGAN CITY, IN 46360	☐ In-Kind (describe)			10/07/70/2	
- "				Manage	
	Other Receipts:	\$450.00	\$550.00		
1	☐ Interest ☐ Loan	**	X*	118	
	Miscellaneous (specify)			I ZONĀ	
Contributor's Occupation (if required)				1.201	
3.	Contributions:				
1	Direct			8.1624	
	In-Kind (describe)			UNA TO	
	89870 Wes 85 /A			17. 17. 17. 17. 17.	
	Other Receipts: Interest Loan			44	
	Miscellaneous (specify)				
Contributor's Occupation (if required)				16420	
4.	Contributions:				
the."	Direct				
	☐ In-Kind (describe)			ALS	
				Pote	
	Other Receipts:			2445	
	Interest Loan			i de la companya de l	
	Miscellaneous (specify)			1/4 - 1/4	
Contributor's Occupation (if required)				· vA	
5.	Contributions:			1715//4	
	☐ Direct			1760	
	In-Kind (describe)			The same of the contract of	
	·			Mary Zizi ali	
	Other Receipts:				
	Miscellaneous (specify)				
				145	
Contributor's Occupation (if required)		0 n.h		This is	
11 ACT AT THE PARTY OF THE PART	THIS PAGE OF SCHEDULE A	\$ 905.0		1 1 3 T	
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$97247			



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FIL	E NUMBER
	4.0
Page	of/ 7

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE REC F
1. (4)	Contributions: Direct In-Kind (describe)			IONS
NONE	Other Receipts: Interest Loan Miscellaneous (specify)		# 1	
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			IONS ipts
	Contributions: Direct In-Kind (describe)		5.72	
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			ONS
	Other Receipts: Interest Loan Miscellaneous (specify)		e e	
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			ONS
	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet.)	\$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
		305
Page _	10 of /	17

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1. NONE	Contributions: Direct In-Kind (describe)			pts
NONE	Other Receipts: Interest Loan Miscellaneous (specify)			OM
2.	Contributions: Direct In-Kind (describe)			EEVEU
	Other Receipts: Interest Loan Miscellaneous (specify)			в Ву
3.	Contributions: Direct In-Kind (describe)			in ion
	Other Receipts: Interest Loan Miscellaneous (specify)			inved
P- 4.	Contributions: Direct In-Kind (describe)			567
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 0.00		Year to 4
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FIL	ENUMBER
Page//	_ of / 7

CONTRIBUTORIS FULL NAME AND	TYPE OF CONTRIBUTION			DATE REC
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	(mm/dd/yy)
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	☐ Direct☐ In-Kind (describe)			LIES
NONE	In-Kilid (describe)			ceipts
HONE	Other Receipts:		10	
-13	☐ Interest ☐ Loan		•	
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Miscellaneous (specify)			125-41 W LOD RE
1 v	s s			
2.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			10/10/00/00
	Miscellaneous (specify)			
				n Desipts
3.	Contributions:			
t-	Direct			
Sec.	In-Kind (describe)			THOUGH
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			
				m
4.	Contributions:			21318
	Direct			2.32779
	In-Kind (describe)			
	Other Receipts:			eipts)
	Interest Loan			
1.	Miscellaneous (specify)			
				E 15 4 3 119 45
5.	Contributions:			
	Direct			1987
	In-Kind (describe)	1		The second for
	Other Bassinia			
	Other Receipts: Interest Loan			
	Miscellaneous (specify)			The second second
				101
SURTOTAL	THIS PAGE OF SCHEDULE A	\$ 0.00	刘宗 号 (东连东)。	" "上"时间"。
TOTAL OF ALL PAGES OF SCHEDULE A		22.5.5	Care de la	
	15a of the Summary Sheet.)	\$ 0.00	TOTAL PROPERTY OF	



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE	NUMBER
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1	/7_
Page _	_of _//

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE REC (mm/da/yy) RECEIVED BY-2
1.	Contributions: Direct In-Kind (describe)			ipts
NONE	Other Receipts: Interest Loan Miscellaneous (specify)			
2.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan			Piet.
	Miscellaneous (specify)			nts
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions: Direct In-Kind (describe)			B ST
	Other Receipts: Interest Loan Miscellaneous (specify)			ete
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL *	THIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEM	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	\$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FIL	E N	UM	BER		
					#13 #13	
Page	1	3	of	11	7	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
Code O BEACHER PRINTING 911 FRANKLIN ST MICHIGAN CITY, IN 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$0.00	\$208.93	03/31/20
FRONTIER PHONE CO		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$251.04	\$751.37	09/23/20
GENERAL INSURANCE P O BOX 70 APORTE, IN 46350		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$590.00	\$590.00	S 07/14/20 3/31/20
LAPORTE CIVIC AUDITORIUM 1001 RIDGE ST LAPORTE, IN 46350		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$500.00	\$500.00	09/30/20
Code O LAPORTE MASONIC TEMPLE P O BOX LAPORTE, IN 46350		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$1,125.00	\$3,375.00	0925/20
Code O NIPSCO ELECTRIC & GAS		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$261.00	\$734.96	09/14/20
Code O LAPORTE COUNTY FAIR 2581 W ST RD 2 LAPORTE, IN 46350		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _ Purpose:	\$0.00	\$675.00	02/28/20 02/5/20
-1,4	SUBTOTAL THIS PAG		\$27,27.24		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the		\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE N	UMBER
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70	1.4	17/20

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
POSTMASTER LAPORTE, IN 46350		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$240.00	\$240.00	09/30/20
ST. JOE COUNTY CHAIRMAN ZACK POTTS SOUTH BEND IN		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$0.00	\$550.00	03/12/20
ROUND THE CLOCK CATERING PINE LAKE AVENUE APORTE, IN 46350		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$1,440.10	\$1,440.10	09/30/20 09/30/20
PAUL VINCENT 1516 MICHIGAN AVE LAPORTE, IN 46350		Payment of Debt Returned Contribution Other Purpose:	\$669.38	\$669.38	09/30/20
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			3/20
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		9	30/20
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		31°16	2/20
TOTAL OF ALL DA	SUBTOTAL THIS PAG		\$2349.4		

(Enter total on ITEM 17a of the Summary Sheet.)



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14) (CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

		Page _	of	1/
PUBL Enter Text of Public Question. Type of Question: Statewide Local Position: Supported Opposed	IC QUESTION INFORMATION			ES
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	PERIOD	YEAR-10-DATE	(mm/dd/yy)
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			ES
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		. 20	(177)
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			÷ ES
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Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			129
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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

(Enter total on ITEM 19 of the Summary Sheet.)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	FILE NUMBER	
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CREDITOR'S OR LENDER'S NAME	ENDORSER'S OR VENDOR'S NAME	AMOUNT	DATE DEBT	CUMULATIVE	OU) G
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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, **OWED TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

Page _____ of ______0.00

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State Form 4606 (R14 / 10-17) Indiana Election Division (IC 3-9-5-14)

Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

(CFA-4) Summary Sheet

TOTAL PAGES IN ENTIRE CFA-4 REPORT

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A Mailing Address (Address where all campaign finance correspondence is received.) 4. Mailing Address (Address where all campaign finance correspondence is received.) 5. City, State, ZIP Code 6. Party Affiliation (if applicable) CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full Name of Candidate (Include any nickname.) 9. Office Sought (Include district number, if any. Not required for exploratory committee.) 10. County of Residence 11. Check one: 12. Reporting Period (mn/dd/yr): 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments a time beginning of this reporting period. 15. Uniternized 16. Add lines 15a and 15c in Column A and lines 14 and 15c in Column B. 16. Add lines 15a and 15c in Column A and lines 14 and 15c in Column B. 17. Add lines 17a and 17b in both columns. 18. Cash on hand and investments at cose of this reporting period (Subtract 17c from 16 in both columns.) 19. Debts OWED BY the committee (Use Schedule D.) CERTIFECTION 10. Cert from: CERTIFECTION 10. Cert is Title Uniternized (Less Condedule D.) 10. Certified Titls Title Certified Title Title Certified T	ALSO BELLEVILLE DE LE DE LE DE LE		
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Signature of theasurer 03/05/2021 UNB 8 2021	Signature of Treasurer	n Date (11111/00/00)	

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

TERK OF LA PORTE CIRCUIT COURT

Date (mm/dd/y)



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts
te type or print legibly IN

	FILE	NUME	BER	
				S.10
Page _	2	of	1-7	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
1.JOHN BEALOR 7253 E 350 N ROLLING PRAIRIE, IN 46371	Contributions: ☑ Direct ☐ In-Kind (describe)			05/09/20LS
	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$200.00	IZONA
Contributor's Occupation (if required)				
2.DION BERGERON 1018 PROVIDENCE ST MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			9/24/20
	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$300.00	IZONA
Contributor's Occupation (if required)				
3. GEORGE BOLLHORST, SR 307 LONG BEACH LN MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			10/07/20
Contributed a Constant of Contributed and Contributed and Constant of Contributed and Contribu	Other Receipts: Interest Loan Miscellaneous (specify)	_0 -	\$390.00	I ZONA
Contributor's Occupation (if required) 4. WILLIAM CHRISTAKES				W 1 - 6
610 LAKESIDE ST LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			10/15/20
	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$1,350.00	IZONA
Contributor's Occupation (if required) BUSINESS OWNER				. 213
5. EARL CUNNINGHAM 6311 W SHIVA DR LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			10/07/20
	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$150.00	· · · · · · · · · · · · · · · · · · ·
Contributor's Occupation (if required)		The state of		
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TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

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Page _	3	of _	1	7	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) 1. DAKOTA EULER	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED BY
301 PINE LAKE AVE LAPORTE, IN 46360	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$110.00	05/09/20
Contributor's Occupation (if required)	1			IZONA
1328 LAKESIDE ST LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			09/24/20
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$250.00	IZONA
3. DAN GRANQUIST	Contributions:			
1070 S CALUMET RD # 892	Direct			
CHESTERTON, IN 46304	In-Kind (describe)		\$200.00	10/07/20
r	Other Receipts: Interest Loan Miscellaneous (specify)	~ 0 -		I ZONA
Contributor's Occupation (if required)				120,120
4. CYNTHIA HEDGE) 2 d me
P O BOX 9600	Contributions:			1.50
MICHIGAN CITY, 46360	☑ Direct ☐ In-Kind (describe)			07/31/20
	Other Receipts: Interest Loan Miscellaneous (specify)	_0~	\$200.00	J ZONA
Contributor's Occupation (if required)	1		1	7.40
5. RALPH HOWES	Contributions:			
3487 W WAVERLY RD	✓ Direct			
LAPORTE, IN 46350	In-Kind (describe)			10/15/20
	Other Receipts: Interest Loan Miscellaneous (specify)	_0-	\$200.00	I ZONA
Contributor's Occupation (if required)				
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TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$		*



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

	FILE	NUME	BER		
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Page	=	of _		1	

				- 42	Tail.
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEI (mm/dd/yy RECEIVED)
1.ADAM KORONKA LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)	PENIOD	YEAR-IU-DATE	10/15/20	S
,	Other Receipts:	-0-	\$150.00	1	
Contributor's Occupation (if required)	Miscellaneous (specify)			I ZONA	- 0
2.TIM KUNSTEK 2654 S 400 E LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			10/07/20	
	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$145.00	I ZONA	
Contributor's Occupation (if required) 3. CORL LAUN	Contributions:			720	
P O BOX 344 KINGSFORD HEIGHTS, IN 46346	☑ Direct ☐ In-Kind (describe)	D.		10/07/20	i i i i i i i i i i i i i i i i i i i
s	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$150.00	IZONA	
Contributor's Occupation (if required)				144	
4. MARK LEYVA 3545 CONDIT AVE HIGHLAND, IN	Contributions: ☑ Direct ☐ In-Kind (describe)			10/07/20	
	Other Receipts: Interest Loan Miscellaneous (specify)	_0 -	\$200.00	I ZONA	100
Contributor's Occupation (if required)	-			7 720	
5. RICHARD LIDKE P O BOX 9402 MICHIGAN CITY, IN 46360	Contributions: ☑ Direct ☐ In-Kind (describe)			10/15/20	
N. 20.	Other Receipts: Interest Loan Miscellaneous (specify)	_0 ~	\$200.00	IZONA	
Contributor's Occupation (if required)				50	
	HIS PAGE OF SCHEDULE A	\$ 0			
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$			K



State Form 4606 (R15 / 5-19)
Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

FILE NUMBER					
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Page_	_	of _	,	L_	

CONTRIBUTORIO				110	ije.
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED)
1.ROBERT LONIE 1401 1/2 FRANKLIN ST APT B MICHIGAN CITY, IN 46360	Contributions: Direct In-Kind (describe)			09/24/20	5
	Other Receipts: Interest Loan Miscellaneous (specify)	-0 -	\$150.00	I ZONA	
Contributor's Occupation (if required)				T+:	-
2.DANIEL LUCK 1311 BOYD BLVD LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			05/09/20	11
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	-0 -	\$500.00	I ZONA	
3. DUANE MILLER	Contributions:			7	-
605 LAKESIDE ST LAPORTE, IN 46350	Direct In-Kind (describe)			10/15/20	
Contributorio Constanti e (1	Other Receipts: Interest Loan Miscellaneous (specify)	-6-	\$280.00	I ZONA	
Contributor's Occupation (if required) 4. DOLLY MILLICK				170	
3708 OAKDALE CT	Contributions: Direct		1	- 14	
MICHIANA SHORES, IN 46360	☐ In-Kind (describe)			10/15/20	
	Other Receipts: Interest Loan Miscellaneous (specify)	-0-	\$150.00	7710	- 1
Contributor's Occupation (if required)				IZONA	
5. BARB MOORE	Contributions:				
1532 MICHIGAN AVE LAPORTE, IN 46350	☑ Direct ☐ In-Kind (describe)			09/24/20	
4				* ***	211
	Other Receipts: Interest Loan Missellangeus (seesiful	-0-	\$250.00		
Contributor's Occupation (if required)	Miscellaneous (specify)			I ZONA	
			1		
	HIS PAGE OF SCHEDULE A	-0-			74
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$			



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

FILE NUMBER				

Page _	6	_ of	71A	

	, and is optional.		aye	
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) 1.LEIGH MORRIS	OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED 13Y
424 UPPER LAKE SHORE DR	Contributions: Direct			
LAPORTER, IN 46350	☐ In-Kind (describe)			09/24/201
				00/2-1/2000
	Other Receipts: Interest Loan	~ 0 -	\$500.00	
	Miscellaneous (specify)			VALUE OF THE PARTY.
Contributor's Occupation (if required)				I ZONA
2. RICH MROZINSKI	Contributions:	-		11-2
2303 E 150 N	Direct			
LAPORTE, IN 46350	☐ In-Kind (describe)			10/07/20
				10/0//20
	Other Receipts: Interest Loan	_0_	\$405.00	
	Miscellaneous (specify)			
Contributor's Occupation (if required)	- mesonaneous (specify)			IZONA
3. JAIME OSS				
3846 N MALAGA DR	Contributions: Direct			
LAPORTE, IN 46350	☐ In-Kind (describe)			10/07/20
				10/07/20
	Other Receipts:	-0-	\$350.00	
3	☐ Interest ☐ Loan ☐ Miscellaneous (specify)		1	
Contributor's Occupation (if required)	- modelianeous (apeciny)			IZONA
4. DUANE PARRY	0-14 4			
2206 MAPLE ST	Contributions: Direct			
MICHIGAN CITY, IN 46360	In-Kind (describe)			10/15/20
				10/10/20
	Other Receipts: Interest Loan	-0-	\$200.00	
	Miscellaneous (specify)	==		
Contributor's Occupation (if required)	13,23.77			IZONA
5, MIKE ROSENBAUM	Contributions:			
1515 INDIANA AVE	Direct			8 89 LOMAS JAN
LAPORTE, IN 46350	In-Kind (uescribe)			10/15/20
		1		· NA
=	Other Receipts: Interest Loan	~0-	\$500.00	
	Miscellaneous (specify)			14.40
Contributor's Occupation (if required)				IZONA
	HIS DACE OF BOULEDING		ACCOUNT OF THE PARTY OF THE PAR	
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ON X	~0-		
(Enter total on ITEM	15a of the Summary Sheet.)	\$		14.4



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

FILE NUMBER					
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Page	7	of/	7:A		

9 0 0	year. Otherwise, this is optional.		'age :	of /
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code) 1.RON SCHAFER	OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED (mm/dd/yy) RECEIVED 13Y
1566 GLACIER BEND LAPORTE, IN 46350	Contributions: Direct In-Kind (describe)			09/24/20ts
Contributor's Occupation (if required)	Other Receipts: Interest Loan Miscellaneous (specify)	_0_	\$350.00	IZONA
2. JOE SMITH 1078 S 300 E LAPORTE, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	_0_	\$150.00	05/09/20
Contributor's Occupation (if required)				I ZONA
1501 MICHIGAN AVE LAPORTE, IN 46350	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	_0_	\$1,650.00	09/24/20
Contributor's Occupation (if required) BUSINESS OWNER 4. ALLEN STEVENS	Contributions:			. 20
5277 W 1475 S HANNA, I 46340 Contributor's Occupation (if required)	☑ Direct ☐ In-Kind (describe) ☐ Other Recelpts: ☐ Interest ☐ Loan ☐ Miscellaneous (specify)	0_	\$309.00	10/15/20
LAPORTE, IN 46350 Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Miscellaneous (specify)	~0.11	\$200.00	05/09/20 I ZONA
SUBTOTAL T	HIS PAGE OF SCHEDULE A	- D~		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)			



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A	COLUMN B	DATE REGENTS
(street, number, city, state, ZIP code) 1.PAUL VINCENT	ON OTHER REGERE	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED
1516 MICHIGAN AVE	Contributions: Direct			Colores (
LAPORTE, IN 46350	In-Kind (describe)			ALS
and the second				10/07/201:
	Other Receipts:	_ 0 _ 0	\$455.00	*
	Interest Loan			
Contributor's Occupation (if required)	Miscellaneous (specify)			IZONA
2.ILENE ZONA				1.0
6706 N 300 WEST	Contributions: Direct			
MICHIGAN CITY, IN 46360	☐ In-Kind (describe)			10/07/20
				10/07/20
98 F	Other Receipts:	_0 -	\$550.00	
	Interest Loan		C. # C. (C.) 2000 CO	
Contributor's Occupation (if required)	Miscellaneous (specify)			IZONA
Terry Garner	Contributions:	-		1., 10
1 70 Box 136	☐ In-Kind (describe)			11/16/20
POBOX 136 HANNA, IN 46340		000 M	250.0	TZANA
MAININA, IN ABS 10	Other Receipts:	250.00	250,00	J. CONT
	Interest Loan Miscellaneous (specify)			
Contributor's Occupation (if required)	Li moccilaricous (specify)			1 10 Vy 2(*
4.	Contributions:			75.45
	Direct			July 18
1	☐ In-Kind (describe)			
				特人
	Other Receipts:			126.4
	Miscellaneous (specify)			
Contributor's Occupation (if required)				3.1
5.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Miscellaneous (specify)			Samuel Miles
Contributor's Occupation (if required)				Asia, Inc.
SUBTOTAL TH	IIS PAGE OF SCHEDULE A	250 17		1 (A. C. S. T. C. M.)
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	250.00		
(Enter total on ITEM 1	5a of the Summary Sheet.)	250.00		1



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE	NUMBER
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Page	_ of

			Page	-A. —	of /	
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	AMOU	NT THIS	COLUMN B	DATE REC	1
	Contributions: Direct In-Kind (describe)	FCN	RIOD YE	EAR-TO-DATE	RECEIVED	Man.
NONE	Other Receipts:			el e	ight.	S
2.	Miscellaneous (specify)					
	Contributions: Direct In-Kind (describe)				: 987	
	Other Receipts: Interest Loan Miscellaneous (specify)					
3.	Contributions:				17 L	
	☐ Direct ☐ In-Kind (describe)					1
	Other Receipts: Interest Loan Miscellaneous (specify)					
4.	Contributions: Direct In-Kind (describe)					
	Other Receipts: Interest Loan Miscellaneous (specify)					- Amilian
	Contributions: Direct In-Kind (describe)					-
	Other Receipts: Interest Loan Miscellaneous (specify)					io.
SUBTOTAL 1	THIS PAGE OF SCHEDULE A	\$ 0.00		Market Street	5007	¥77.2
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$ 0.00				N



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE	NUMBER
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COLUMN B	DATE RECEIVE (mm/dd/yy)

CONTRACTOR OF THE PARTY OF THE			3-10	/ _
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVE (mm/dd/yy) RECEIVED BY
1.	Contributions: Direct In-Kind (describe)	LINOD	TEAR-TO-DATE	KECEIAED B
NONE	19			្រុ
	Other Receipts: Interest Loan Miscellaneous (specify)			.4.
2.	Contributions:			
	Direct In-Kind (describe)			ju sadijeme
	Other Receipts: Interest Loan Miscellaneous (specify)			7.0
3.				
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
4.	Contributions			
	Contributions: Direct In-Kind (describe)			<i>(</i>
	Other Receipts: Interest Loan Miscellaneous (specify)			
5,	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
TOTAL OF ALL BACES OF SCUENING	THIS PAGE OF SCHEDULE A	0.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM)	A ON THE LAST PAGE ONLY 115a of the Summary Sheet.)	0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER	1
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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTIO	AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEI
i.	Contributions: Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	RECEIVED BY
NONE	Other Receipts:			ipis
2.	Miscellaneous (specify)			
	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			10
3.	Contributions:			
	In-Kind (describe) Other Receipts:			2 452
	☐ Interest ☐ Loan ☐ Miscellaneous (specify)			्य स्टब्स
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miscellaneous (specify)			
SUBTOTAL TH	IIS PAGE OF SCHEDULE A	\$ 0.00		
TOTAL OF ALL PAGES OF SCHEDULE A C	ON THE LAST PAGE ONLY 5a of the Summary Sheet.)	\$ 0.00 \$ 0.00		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this Schedule (over \$200 if regular party committee).

Page	120	17

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1.	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT Contributions:	N COLUMN A AMOUNT THIS PERIOD	COLUMN B	DATE REG (mm/dd/ RECEIVED	
N	ONE	Direct In-Kind (describe)			5.0	
		Other Receipts: Interest Loan Miscellaneous (specify)			\$ \$ \$	
2.		Contributions: Direct In-Kind (describe)				
		Other Receipts: Interest Loan Miscellaneous (specify)				300
3.		Contributions: Direct In-Kind (describe)				
4.		Other Receipts: Interest Loan Miscellaneous (specify)				
		Contributions: Direct In-Kind (describe)				
5.		Other Receipts: Interest Loan Miscellaneous (specify)				3.7 3.7
		Contributions: Direct In-Kind (describe)				350
		Other Receipts: Interest Loan Miscellaneous (specify)				**** ****
	SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$ 0.00			
	TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet.)	\$ 0.00			
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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE	NUMBER	
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		PACK.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd/yy)
BEACHER PRINTING 911 FRANKLIN ST MICHIGAN CITY, IN 46360		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$0.00	\$208.93	03/31/20
FRONTIER PHONE CO		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	25236	1003.73	12/15/20
GENERAL INSURANCE P O BOX 70 LAPORTE, IN 46350		☑ Direct	585,00	117500	12/10/20
LAPORTE CIVIC AUDITORIUM 1001 RIDGE ST LAPORTE, IN 46350		☑ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	-0-	\$500.00	09/30/20
LAPORTE MASONIC TEMPLE P O BOX LAPORTE, IN 46350		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:	\$1,125.00	4500.00	12/25/20
Code O NIPSCO ELECTRIC & GAS		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$261.00	995,96	. 0/20
LAPORTE COUNTY FAIR 2581 W ST RD 2 LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other urpose:	\$0.00	\$675.00	02/28/20
TOTAL OF ALL PAGE	SUBTOTAL THIS PAGE ES OF SCHEDULE B ON THE L (Enter total on ITEM 17a of the	AST PAGE ONLY	1223.36		



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE	E NUN	MBER		
				8/20)
Page	14	/ -	1"	7	1

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	(N.P.	
(Succe, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE (mm/dd//ry)	
POSTMASTER L'APORTE, IN 46350		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other _ Purpose:	-0-	\$240.00	09/30/20	
ST. JOE COUNTY CHAIRMAN ZACK POTTS SOUTH BEND IN		✓ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	\$0.00	\$550.00	03/12/20	
ROUND THE CLOCK CATERING PINE LAKE AVENUE LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	-0-	\$1,440.10	09/30/20	
PAUL VINCENT 1516 MICHIGAN AVE LAPORTE, IN 46350		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	-0-	\$669.38	09/30/20	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			1912	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			: Jan 2	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:				
TOTAL OF ALL BAC	SUBTOTAL THIS PAGE		-0-			

(Enter total on ITEM 17a of the Summary Sheet.) 223.30



State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

	FILE NUMBER		
	7/-/	17	
Page _	of		
Page _	15_of_1		

			Page _	19_of_	/ /	
Enter Text of Public Question.	PUBLIC QUESTIO	N INFORMATION		· No.		
					1)	
	1				Œ	S
Type of Question: Statewide Position: Supported Oppo	Local sed				788	
RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF	
(street, number, city, state, ZIP code)		PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDIT (Imm/dd/yy	j
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt				9
5 0		Returned Contribution Other				18
NONE		Purpose:				Cer.
					<u> </u>	
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			\$	3
		Returned Contribution Other			22	le l
		Purpose:		31. 20.		
Code		☐ Direct ☐ In-Kind				
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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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Page _	165	of_	_/_		

CREDITOR'S OR LENDER'S NAME AND MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME	AMOUNT	DATE DEBT	CUMULATIVE	OUTST
(street, number, city, state, ZIP code)	AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED (mm/dd/yy)	PAID YEAR-TO-DATE	BAI PERI
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State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

BORROWER'S NAME AND MAILING ADDRESS	CO-SIGNER'S NAME	CO-SIGNER'S NAME ORIGINAL AMOUNT DATE DEBT	RIGINAL AMOUNT DATE DEBT INCURRED		OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	AND MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	(mm/dd/yy)	PAID YEAR-TO-DATE	PERIOD
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